General Information

1. Project Location (address and cross streets): ____________________________________________
2. Describe the current use(s) of the property: __________________________________________

Project Description

1. Number and type of structures or units to be constructed: ________________________________
   ______________________________________________________________________________
2. Total square footage of each structure(s): _____________________________________________
   ______________________________________________________________________________
3. Height and number of stories of proposed structures: _________________________________
   ______________________________________________________________________________
5. Will the housing be occupied by an individual(s) with a disability? Y/N __________________
6. Please describe the specific needs that the disability creates. For example, “the disability makes it
difficult to . . . ” (Do not state the name of the disability or discuss the nature and severity of the
disability). ______________________________________________________________________
   ______________________________________________________________________________
   ______________________________________________________________________________
   ______________________________________________________________________________
7. Describe the Zone Code provision, City regulation, or policy from which reasonable accommodation
   is being requested. Contact City Planning or Development Services staff for assistance in identifying the
   Code or policy that needs to be addressed. ___________________________________________
   ______________________________________________________________________________
   ______________________________________________________________________________
   ______________________________________________________________________________
   ______________________________________________________________________________
8. Describe why the reasonable accommodation is necessary to make the specific property accessible to
   the person.

To the extent that this application discloses the particular disability, staff is instructed not to file
the application with publicly disclosed records

(continued on next page)
Certification
I hereby certify that the statements furnished above, and in the attached exhibits, present the data and information required for this initial evaluation to the best of my ability, and that the facts, statements and information presented are true and correct to the best of my knowledge.

__________________________        _______________________________________________
Date            Signature

Page 2 of 2  Revised 6/1/1210/19/11